

VI. Sarcoma of the Pharynx Removed by Partial Excision and Dislocation of the Inferior Maxilla. By FREDERICK LANGE, M. D., (New York). A very vascular, mixed, round and spindle-celled sarcomatous tumor occupied the left half of the pharynx, extending upward behind the soft palate and down the throat so far as to dislocate the larynx. Following Miculicz, preliminary tracheotomy was performed, followed by an incision along the inner border of the sterno-mastoid muscle, and a horizontal incision along the border of the zygomatic arch so as to expose the angle of the jaw; all that portion which corresponded to the insertion of the masseter muscle was removed subperiosteally and the jaw dislocated so as to afford a view of the interior of the pharynx; in spite of this, a clear idea of the connections of the tumor could not be obtained and it was necessary to scrape it out piecemeal, so that the operation was not as thorough as the operator had desired. The growth was about the size of a goose's egg, so that it interfered with deglutition and was beginning to cause dyspnoea. It had no bony attachments and was encapsulated, but broke down rapidly, so that it was impossible to remove it entire, and the operation was long and tedious. The patient had intense iodoform poisoning, being at first greatly excited and then speechless for fourteen days. He was fed by means of a tube which he one day swallowed through the carelessness of a nurse; after being retained for five weeks, the tube—which was $18\frac{1}{2}$ inches long—was passed per rectum. The patient finally recovered with paralysis of the lip on the side of the wound, but there was no displacement of the teeth and the power of mastication was as good as ever.—*N. Y. Surg. Society*, Feb. 23, 1887.

VII. Fracture of the Fifth Cervical Vertebra with Recovery. By ARPAD G. GERSTER, M. D. (New York). A boy, æt. 13, while bathing, dived into shallow water and struck his head so violently against the bottom that he was stunned; paralysis resulted of the left upper and lower extremities and of the bladder and rectum; there was also paralysis of the right upper extremity—with the exception of the shoulder muscles—with paresis of the corresponding leg. On examination it was found that the spinous process of the fifth cer-

vical vertebra was depressed and gave marked crepitation on stretching the patient's neck and letting go of it; the spinous process of the fourth cervical vertebra was abnormally prominent; a distinct prominence could be felt in the pharynx. The head could not be held up without support and, when released, fell over to one side, if the boy was supported in a sitting posture, which had been allowed by his family. Weight extension by means of Glisson's apparatus and also by elevating the head of the bed was applied, and the bladder was emptied by catheter. The patient experienced relief within thirty-six hours after the extension was applied, and within forty-eight hours, four days after the accident, he was able to pass his water naturally; fifteen days later there was a marked improvement in the right side. After two months, he began to walk with crutches and had continued to improve up to date. His gait was still ataxic, while the left arm exhibited evidences of ulnar paralysis, especially the *main en griffe*; the extension of the hand on the arm was incomplete, and as soon as it was released, it at once recovered its former position. The muscles of the arm and forearm were atrophied, and their condition had been but slightly improved by massage and galvanism. No abnormality of outline was to be detected in the neck, the fracture being firmly consolidated while the irregularities observed in the projection of the spinous processes had been smoothed down by callus. No priapism, a symptom frequently described by authors, had been present.—*N. Y. Surgical Society*, April 27, 1887.

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CHEST AND ABDOMEN.

I. On a Case of Incision and Free Drainage of the Lung for Phthisical Cavities. By ARTHUR NEVE, F. R. C. S., Edin., (Kashmir). The case which the author has recorded is as follows: A young man, haggard and wasted to a degree, came under treatment for a violent cough and profuse expectoration which had persisted for a year. The expectoration amounted to a pint and a half or two pints in the twenty-four hours. It was tough, and in large, flocculent, purulent masses. Microscopically, it was swarming with bacilli. There